

ENTRY BLANK

PLEASE TYPE OR PRINT

Entered previous May Show

☒ Ms.

☒ yes

☐ no

☐ Mr. Artist

Gretchen Oldfather Troibner

(Last Name Last)

Permanent

Address

4785 Clague Rd. North Olmsted

Street

City

44070

Zip

Tel. (216)

777-5298

Area Code

Temporary or

Studio Address

Street

City

Tel. ()

Zip

Area Code

If you do not presently live in one of the counties of the Western Reserve, which county were you born in?

Collaborator

(If Any)

If May Show entries are not accepted or not sold:

☒ Artist will pick up at Museum.

☐ Museum should dispose of.

☐ Museum should ship to artist C.O.D. at this address:

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until June 7, 1981.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature

Gretchen Oldfather Troibner

ENTRY BLANKS

1

- ☒ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Materials

Gouache on Paper

Title

Two Windows

Price or NFS

\$850.00

Insurance Value
if NFS Only

Size

19"x24"

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
Unframed

Price of
Frame

ACCEPTED

X

REJECTED

DO NOT WRITE IN THIS SECTION

181 (1)

ACCEPTED

X

REJECTED

2

- ☒ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Materials

Gouache on Paper

Title

The Prize

Price or NFS

\$850.00

Insurance Value
If NFS Only

Size

19"x24"

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
Unframed

Price of
Frame

ACCEPTED

X

REJECTED

DO NOT WRITE IN
THIS SECTION

182 (1)

ACCEPTED

X

REJECTED

RECEIVED

APB

DATE

4/11/81